

11808 Exposition Blvd
Los Angeles, CA 90064
July 16, 2001

Kimberly Topper, Center for Drug Evaluation and Research
(HFD-21) Food and Drug Administration
5600 Fishers Lane
Rockville, MD 20857

Dear Ms. Topper,

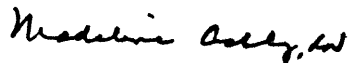
It has come to my attention that the Food and Drug Administration is holding hearings on September 14-15 about decreasing the prescription of opiate analgesic medications, specifically the long acting drug, Oxycontin. As a retired RN I have had much experience with caring for patients with chronic, long-term pain. Whether the pain is caused by neoplastic processes (cancer) or is neurologic or due to other causes, the patient should be able to obtain relief in a humane manner.

While I was working at the Los Angeles Veterans Administration Hospital, we had an all day seminar given by Margo McCaffrey, R.N. She said that the patient's pain is what he/she says it is—it's subjective and not disputable. In her book, "Pain, a Clinical Manual for Nursing Practice" she states "...addiction does not happen when patients take narcotics to relieve pain."¹ She recommended to us the publications of the American Pain Society, 5700 Old Orchard Road, Skokie, IL 60077-1024, with which you may already be familiar.

Both of my parents died with cancer; it was difficult at times to obtain needed narcotics. I felt that the safeguards were unnecessarily stringent at that time. About that time I was working with an MD who was reluctant to prescribe narcotics, fearing that it would trigger an investigation and cause him license problems. I couldn't blame him for his concern but I felt bad that patients had to suffer unnecessarily because of these factors.

I hope that you will consider these concerns when you are holding the hearings and not prevent access to pain relieving drugs to those who need them.

Sincerely,



Madeline A. Ashley, R.N.

¹ McCaffrey, Margo, R.N., M.S., F.A.A.N., and Beebe, Alexandra, R.N., M.S., O.C.N., The CV Mosby Company, 1989, p. 18.